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Pneumonia Typhoides
Richard Hannon

1

Essay on Pneumonia Typhoides

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The Pneumonia Typhoides or Epidemic of 1814 and 1815 which prevailed throughout the U. States, and created general distress in every section of the Country, and has since regularly made its appearance every Winter in some section of the State of Virginia, and North Carolina, came under my notice for the first time during the year 1821, immediately after I commenced my professional studies; being one of the first diseases in which I was called on to act, and certainly the first, that made any impression on my mind, may in a great measure be attributed at this time, the sole and only reason, I can assign for selecting it as my medical dissertation. It is not my intention to theorise at all on the subject of this Epidemic. It is before the Publick from innumerable authors, and men of the first distinction. I shall confine myself to practical facts, such as were made by the bed side of the sick, with the knife after death, and have this faculty to judge, how far my opinions are supported by the practice pursued. Each individual composing this enlightened board, now sitting in judgement on my feeble and youthful essay, must admit, that few

opportunities are allowed the Student to make practical experiments, in the line of his profession, to receive the written opinions of different authors that are placed in his hands, while pursuing his Studies, and occasionally visit the Sick entrusted to the care of his tutors, is perhaps as much as most young men can expect in the way of improvement, till he has passed the ordeal I now stand before;- It cannot therefore I hope be expected that my remarks are without their weak points, or above the critics censure. I know they will have but little to recommend them to your notice, but that little shall be founded on a faithful account of the disease as seen, and the practice pursued.

In pursuing my Medical Studies I was most forcably struck with the many publications that came under my notice, relative to this Epidemic, tho' not one of them appeared to give a clear, and distinct, exposition of the cases, the mode of treatment pursued, and the apparency presenting on dissection, so as to lead to some general plan of managing the complaint, If this had been done I might have chosen some other subject for this essay, but I have not discovered in most of the remarks hitherto submitted to the world, more

than a course of general observations in the disease, in most instances accomodating itself to the preconceived theory of its nature, or to some indefinite conjecture arising from its symptoms: From these causes I believe has arisen, the opposite mode of treatment, which has been pursued, and the unadjusted embarrassment of medical men when called on to treat it. It seems allmost impossible, if the cases had been marked with precision, and the morbid appearances carefully attended to, their could have arisen this great diversity in their opinion concerning the complaint. It strikes me that these communications directed of this sort of accuracy, are calculated to produce extensive injury; Men of every description are led to believe, that in similar diseases opposite remedies have proved successful, and that in cases without analogy, to each other, the same application have been resorted to with advantage; It is not my intention to deny that owing to some, rare and powerful efforts of nature, these facts have been observed in some solitary instances, but I do most strenuously contend that these very cases, to a man of experience, are but assurances of the simplicity, which nature pursues in all her operations; If they fall under his notice they strike him, as memorable facts

with which he may compare every other case, and if he notices all instances of this kind with marked attention, he will find them existing only as exceptions, establishing the general rule he ought to follow. The simplicity which it has been attempted, to introduce, in the description of this disease appears to me, to have done extensive injury, because it has done away that specific mark of symptoms, by which alone any two diseases can be identified.—

It is not my design to deny that the disease is one and the same, notwithstanding the different structures it may happen to interest, it is my belief that it is so, but this proves nothing as regards the management; it certainly does not justify a man, to forget the various divisions of the disease, and the symptoms attending it, it does not justify him in the narration of his own experience, because 'tis his speculations, he argues with his neighbour, to omit the minute incidents of his own cases, which may prove them to be, or not to be, of the nature of the prevailing epidemic;— Want of circumspection, in this point it is believed has produced this great diversity in the mode of treatment.

Every man should state the cases which have fallen under his care, symptom, by symptom, he should

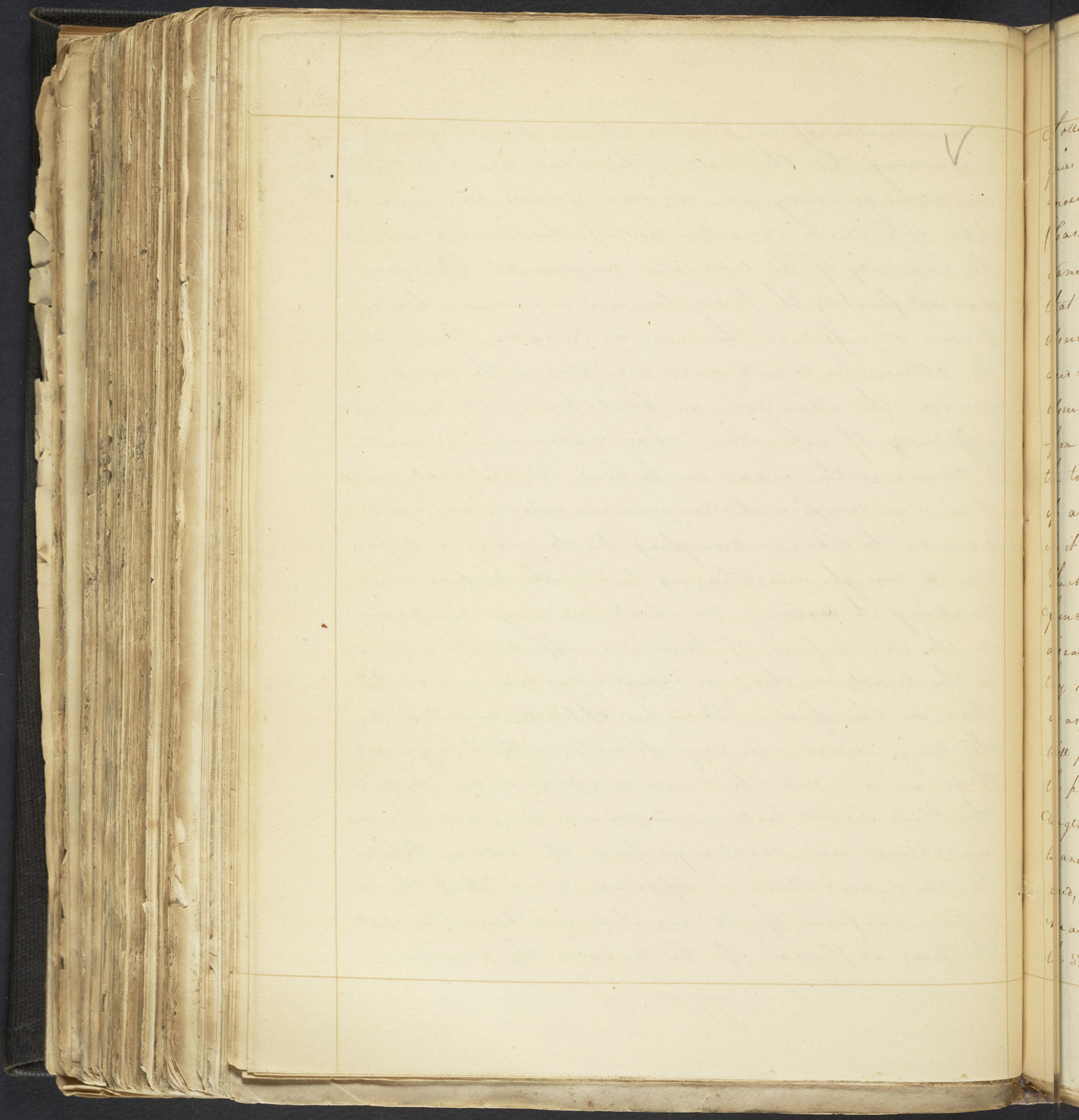
give us the symptoms which together constitute what he chooses to call the epidemic, and then we should have less difficulty in comprehending his meaning; for the sake of mutually testing the identity of cases, and the effects of the same remedies in similar cases, it is to be wished that this might be attended to, so far as constitutional modification of disease will permit; I am not unaware of the varieties resulting from habit, and local situations, but I have reason to believe that the great phenomena of the complaint may be described with tolerable attention; Having enlarged in these few general observations I will proceed to state the nature, and symptoms of the disease, as I have witnessed it, the mode of practice pursued, and the appearances presenting themselves upon post mortem examinations, and leave this board to decide how far my opinion coincides with theirs or is entitled to respect; which if I am so fortunate as to succeed in I shall accomplish all I can wish for or expect.—

"'Tis not in mortals to command success"

But 'tis in virtue to deserve it.—

For the sake of perspicuity I shall divide the subject, according to the various structures which the disease may happen to invade, (viz) The Lungs, The Throat, The Brain, The Abdomen, In all cases the patients

was sensible of a previous chill – But the fever succeeding this, the state of the circulation and the symptoms generally were in many cases, most remark=ably opposite, In some the heat of the skin was increased the rapidity of the circulation augmented, the counte=nance flushed; the pulse however was never hard, pain was felt in the side or breast in breathing. In others the countenance was bloated, the pulse small, the skin cool, without pain but with great difficulty of respiration, these cases were generally attended with sweats on the head. In the first cases there was cough with bloody mucus expectorated, and pain in the side, in coughing, In the second a disposi=tion to cough and wheezing, but with no pain in making the motion – The sick always complained in the second form of pulmonic affection, of a weight in the breast, in this case expectoration was much less than in the first. – These two opposite conditions of the lungs struck me very forcibly, altho I regarded them as one and the same complaint, in the first the blood vessels took on inflammation, and mucus and blood were discharged from the extreme vessels; In the second state it appeared to me, that the se=creting surface of the trachea and bronchia, felt the first influence of the disease, the mucus



following, becoming larger; as in cases of Quinsey the quiescent state of the arterial system were certainly most favourable for such an accumulation — (Cases of Quinsey, as will be mentioned at the same time prevailed) It is to be remarked moreover that this form of the disease, was most generally observed in persons who had been previously debilitated, and I have also to state that the cases were generally observed to occur on sudden transitions of the weather from heat to cold. In both forms of the disease the tongue was moist, and but little changed, if any peculiar character was to be attributed to it, it may be described as white, inclining to yellow, The bowels were generally not much affected in their functions, if anything in the first character of the disease they were inclined to be loose, in the second they required something to stimulate them. — The first — or as I will call it, the active state of the disease I will proceed to examine in greater detail, In many cases the pain was not confined to a particular spot, for any length of time, but flying from one part of the Thorax to another, sometimes on one side sometimes on the other and, immediately (frequently) in the middle of the breast. The Gentleman I saw with notwithstanding the state of the pulse, could not but consider this

first form of the disease, as the same which prevailed here in the Winter of 1813 and 1814. that is an inflammation of the lungs themselves.— he treated them accordingly, and if not always with success, at least with as little loss as could have been expected in so violent a disease. In the Winter alluded to the disease prevailed attended with great propensity to Typhus, altho' all the cases were accompanied by abscess of the Lungs. Whenever he had an opportunity to see these cases in the commencement he bled them, and with great advantage. In every instance the blood presented an extremely buffy coat in comparison with the quantity taken from the patient, an opportunity at that time could not be had to investigate the diseased appearances of the lungs, but it was evident from the profuse expectoration of matter that the disease was the effect of active inflammation.— The great and striking difference between the disease of 1814 and 1815, and 1820 as occurred in the U. S. Naval Hospital at Gosport Virginia, where the opportunity of witnessing it was presented to me, is, that all the cases then terminated in abscess with expectoration. I remember to have heard in numberless cases as much as half a pint and sometimes a pint of purulent

matter being expectorated, in twenty four hours. Many recovered after the abscess discharged, and if the constitution was supported very few were disposed to run into a Hectic State. The Chills in these cases allway gave notice that matter was forming in some part of the System. Recollecting these facts of the Epidemic of 1814 and 15 the gentleman was greatly surprised to find, so little disposition in the attack of this Winter (1820) to terminate in abscess. I have remarked that mucus mixed with blood was the usual expectoration (1814) but I have never seen a case of large purulent discharge, on the contrary the disease has in every instance terminated either by resolution or effusion. Being compelled from unavoidable circumstances to abandon the investigation of Morbid appearances during the time of its last prevalence, I was determined if industry could effect it to see the State of the parts interested in the Complaint. It appears to me a striking fact which is mentioned above, It is not hazarded as a bold assertion to excite wonder, but is mentioned as a true difference which Nature established and the certainty of which was tested by an extensive opportunity for observation. Having stated the symptoms of the first mode I observed the lungs to be affected, that is pain, Cough, heat of

the skin, soft pulse and difficult respiration. I have only to add that they were treated by small and repeated bleedings, Emetics, and other remedies for reducing inflammation. Opiates were never used in this form of the disease, If these remedies failed to arrest the complaint the respiration after a few days (tho short) ceased to be painful, a sweat appeared on the arms and neck, the face or lips became livid, the pulse quick and very small, and the patient gradually sunk by suffocation. When the disease terminated in this way, dissection showed great inflammation in the pleura covering the lungs. Coagulable lymph effused thro' the substance of the organ agglutinating its blood vessels and air tubes so that when cut into it presented a firmness very different indeed from the inflamed organ, if you pressed on the section made a purulent matter was observed to exude, from the surface. The pericardium in these cases was replete with water, and the right auricle of the Heart turgid with blood which the impervious state of the lungs prevented its being gotten rid of. The appearance on dissection of persons who died of the disease as above described with some slight variations, have been found in too many cases to admit a doubt on my mind, as to its real

nature (See history of this disease published in Petersburg and Richmond, Virginia, by a resident Physician of Brunswick County) If the practice of Medicine is to receive any improvement, it certainly may look for it, in the investigation of morbid appearances: Theoretical Speculations are certainly advantageous, but then they should rest on facts sufficiently numerous and well attested, to admit of general application, I will not undertake, to say that the form of the disease which I have seen, has in all cases a similar cause or when it has terminated fatally that the same organic arrangement have existed: But I assert positively that facts men as I have stated them; If we can place confidence, in the opinions of the most celebrated men, who, with patience and accuracy have investigated disease, we may at least conclude that the appearences which I have stated indicate what the professions have consented to call by the name of Inflammation;- If any man for the sake of theory is disposed to draw an opposite conclusion, or any other inference it is vain to attempt to convince him, or to record cases with a hope of improvement. The candid and reflecting will receive the statements with pleasure, and endeavour to apply them to useful purposes.-

The second form, in which the Lungs were

2
invades

affected is the most unusual, and certainly least in appearance like our common pleurisy, the Countenance Skin, temperature and state of the pulse are exactly the reverse of those we would expect to meet with in pleurisy. The disease is very much like a commencing Croup in Children, except that it is not attended by difficult respiration like Croup, The fever succeeds, and does not differ in the complaint;- It seems as if the sudden affection of the mucous lining of the trachea, by cutting off the full oxygenation of the blood, diminished at once the Vital powers of the system, or probably it may be that owing to the structure of the part, inflammation is not so readily excited in it as it is in the pleura;- However the fact may be accounted for, it is a matter of certainty, that when the disease ? inveigh in this manner, all the powers of the system are diminished; If the patient does not sink in twenty four hours, he has fever, If he lives thirty six hours, he has fever and a moist sweat commonly attends it; but have never seen the pulse become active, It is open, soft, and easily compressed, and ever seems to become more expanded, a few hours before death; The Pupil of the Eye, in most cases is dilated.

If the disease gains ground, they complain of increased weight in the chest, or rather fullness, they expectorated with much difficulty, a clashing hot sweat comes on, the pulse grows softer, the mucous cannot be expelled and after what is vulgarly called the rattles, which in some cases lasts many hours suffocation closes the Tragic Scene; The second and when fully formed, most fatal species of the disease is generally attended and preceded by a partial aphthoma, the patient speaks to you as in a whisper it is often combined with Typhus in weak patients where there is tremor, and a dry brown tongue;

But it has often been original and in the best Constitutions, and its commencement is as exactly detailed as I am capable of doing it.

In these cases neither the Lancet or purgatives were used, for by a long experience it was found that purges even in the first form of disease depressed at once so much the powers of the system, that it was concluded no advantage could be reasonably expected from them, believing it to be a croup, tho' without fever or difficult breathing; emetics were tried so as to vomit and discharge the mucous, the patients were much relieved by them, particularly if the disease

had existed but a few hours.—

In many instances an Emetic of Tartrized Anti=
=mony completely relieved them, after this a Blister
was generally applied to the throat, and breast, and
expectorants administered, stimulants were not used,
if the pulse kept its force, for my preceptor
was anxious to see if it became more open, whereon
it did the patients chance for a recovery was a good
one.— If a moderate fever came on, it was better
to let it alone, than to combat it with the lancet
and purgatives. If the breathing became worse the
Emetic was generally repeated, In one case particu=
=larly the patient was thrice relieved by this mode
of treatment, fumigations were also tried of various
sorts to the fauces, but with no decided advan=
=tage, Whenever the disease resisted this mode of
treatment, it indicated its having existed long
enough to do its mischief, and bid defiance to
any degree of bolaness, which might prompt a
more active practice, so fully was my tutor impressed
with this conviction that he endeavoured to check it
at its commencement, believing its developed form, as
allmost perfectly ingovernable— and even with this
advantage, I have seen it terminate fatally in a
very few hours, The accounts which I have given of

of this second form is I hope sufficiently clear to prevent any man from being led into error. I am sorry I am not able to afford better assistance in its management, but I am content if I prevent its being confounded with other varieties; When the disease in this form terminates in death, the appearances on dissection are as follows— The lungs instead of being surcharged with blood, and unaered firm by coagulable lymph, as in the first described cases, were nearly of their natural colour and consistency, but on cutting into their substance and pressing on the section, a purulent mucous could be observed exuding thro' every ~~cut~~ section made thro' the bronchia, I could not owing to particular circumstances get a chance to examine the Trachea, by laying it open, so that I can say nothing as to its condition; I am induced however from a consideration as to the mode in which the disease occurred, to believe that no one part in particular was affected, but that it was generally diffused thro' the whole lining of the air tube.— They complained of no sense of difficulty in the throat itself, but referred their distress to the middle of the sternum; Having thus concluded the two modes in which I observed the

lungs to be affected. I will now take up the disease as it affected the throat. the first case of this kind I observed was early in October and the disease terminated fatally in ten hours. We must for the sake of comprehending the subject, trace the disease as it affected two structures.- The Larynx, and the glandular parts, of the throat and jaws.- the first was much the most rapid and deadly complaint, and altho' very much like the second form of pulmonic affection described, it resembled more the croup in having some what of a difficult respiration, and being always attended by pain at the Thyroid cartilage, the eyes in these cases were prominent and blood shot owing to the difficulty in breathing, the pulse small and heat of the skin but little if at all augmented. In these cases a careful examination of the throat presented, but little appearance of alteration in the secreting membrane, sometimes it was of a glossy white, and sometimes a little redder than is generally discovered, but in this as in the croup but little benefit resulted from the examination, as nothing was ever discovered to elucidate the complaint.- Whenever the cases were violent in the commencement and attended by this pain at the cartilage, and rapidly increased in suffocation the patient died. Emetics

were used, sometimes, the lancet, blisters and Calomel purgatives, but the disease in many cases was so rapid in its progress, as to bid defiance to any remedies. it sometimes terminated in eight, and ten hours, and in many in the course of twenty four hours, I could not get an opportunity to examine these unfortunate cases, so that I can say nothing as to the immediate cause of death, the milder forms of the disease were frequently relieved by an Emetic, and blisters, and when the disease had time to prevail freer the lancet was used aided by Calomel purges. I do not consider the failure of the emetics, Calomel, and Lancet to remove the higher grades of the disease any proof of the impropriety of the remedies. On the contrary I believe they are the only assistance we can afford, I am induced to think so, because when the disease is of a milder nature, or does interest the Vital organs, they unequivocally are the most certain means in diminishing its symptoms and shortening its duration; if we consider moreover its analogy to Croup, and that it makes its attack on persons in full health, without a smitting time enough for debility to be induced. I think it can hardly be considered as a complaint to be cured by the stimulant plan of treatment, If any Gentleman however, who has

watched the complaint, can state that in this very form, he has relieved it by this course, I am not so tenacious of theoretical speculations, as to oppose them to practice in one well attested fact, fortunately this form of the attack was not the most common, but the disease more generally expended itself on the Tonsil glands, sometimes the submaxillary, and in some rare instances the Lymphatics of the Neck, the Parotid glands were frequently enlarged but as the mumps prevailed at the same time, no decision could be had from the enlargement. This form of the disease was much the most manageable, and tho' not always unconnected with an affection of the Larynx. I saw but two cases of enlarged tonsils terminate fatally, these two cases were the first affections of the throat I had seen, they were rapidly fatal, one terminating in twenty, the other in twenty four hours. In both of these cases the Trachea was opened, and after the operation the patients appeared perfectly relieved. The pulse became open and regular they were both operated on, in eight hours after the disease invaded them, Notwithstanding the apparent relief after the operation they both died, certainly they did not die, from mechanical obstruction, at least as far as could be perceived, for

an assistant remained with them to watch the Tube, the death in these cases must have been the effect of the disease in trachea below the opening and perhaps extended to the minutest branches in the lungs: in these two cases the respiration was much more rapidly affected, and was some what convul=sive - altho I have (when I believed the glands to be affected) seen the patient compelled to sit up to get his breath, still the respiration was gradually impaired, and not attended with spasmodic respi=ration, But this affection of the glands seemed to bring the constitution, much more on a par to combat the disease - Like the first described attack on the lungs the disease was attended by fever, and increased action - but the pulse was never strong, allways small and weak and very quick, - The tonsils some=times were red and turgid, sometimes so large as almost to touch across the throat. In other cases they were <u>swollen</u> and large but never red. Sometimes the disease was exclusively confined to the Uvula, a case of this kind terminated fatally in ten hours the disease in this shape terminating by small ul=cerations and a thick adhesive matter seemed to be adhering to the whole Velum palati, These affections were more troublesome, than alarming, as none of

the patients could swallow. till the inflammation had subsided, - altho' the pulse in the pure affection of the tonsils did not correspond ~~with~~ with the cor=dition of the throat. still when the patients were strong in constitution they were invariably bled, the effect was most salutary and the blood allways ex=hibited a sizy appearance. Poultices to the jaws, fumi=gations, and a solution of Tart: Antimo: to purge were used, gargles were not resorted to, in consequence of the pain they produced. in every instance after the two first days, scarification were used by means of a lancet, fixed on the end of a stick, it was passed deep in the tonsils, in three or four places in each and encourage their bleeding by hot water. - not a patient treated in this way and of this sort died, and as simple as the scarification may appear, if it be done boldly, and in time the relief is surpri=sing, But to be fully useful it should be repeated whe=ever the difficulty in respiration is increased, this form the disease terminates allways by resolution as it is called. save the small ulceration I mentioned as sometimes affec=ting the Uvula. I do not remember a case of complete suppuration, altho' I have often seen the tonsils remain enlarged for many weeks, considering the great pro=pensity the tonsils have to suppuration, it appears to

me, that is a fact worthy of recollection; I know of no probable way this fact can be explained, we can only refer it to that particular modification of disease which prevented the complaint when it assailed the lungs, from proceeding to form matter, and which seems equally to have influenced it, when the tonsils become its seat. The third form of the disease or that which attacked the brain we will now proceed to examine. In some of these cases the patients were seized as if with apoplexy, and exhibited every symptom ascribed to that complaint. They were insensible, the pupils dilated, the pulse soft and regular, sometimes stertorous breathing attended, they generally speaked especially and in some instances they had involuntary discharges, they had every indication of pressure on the brain, either, on the coverings of the medulary substance or else in the cavities of the brain itself. I never saw a case of this kind recover, and I lament to say I never could get an opportunity to examine such a case, but no one I suppose can have a doubt relative to the immediate cause of destruction, In opposition to this instantaneous mode of attack, I have seen in several instances the disease ushered in, by regular chills, pain in the head and back, In the first case I saw, the patient complained of most excruciating pain in the loins

and back, and uneasiness in the head, he had but little fever and his pulse was not active, he was purged, the next day he was more restless, throwing about and seems hot delirious, he was bled largely and the pupil of the eye was observed to be contracted, In the course of the day he became more unmanageable and lay with his head under the chin. he was again bled, purged, and had a blister applied to his head. This plan was pursued he became more restless and died on the following evening, On examining the scull, the scalp was observed to adhere in the course of the sagittal suture in one or two places very firmly to the bone, after removing the bone the dura Mater was uncommonly turged, in the course of the longitudinal sinus, and throughout more vascular, than it is usually found to be, But the seat of the disease was below this membrane, continuing it up along the dura Mater, by cutting on a line, with the section of the scull, the whole of the Pia mater, in both hemispheres was covered with matter laying between it and the dura Mater, It was secreted from the vessels of this membrane no doubt, and was the effect of the inflammation it had sustained, the medulary substance of the brain then cut into, was dotted throughout with blood, and the ventricles were filled with a quan-

quantity of serum, altho' the disease in this case was some-what protracted, so as to give an opportunity for the trial of remedies; still it persevered in its course of destruction, certainly no liberal man will contend that the remedies were not appropriate, that may perhaps be said they were not pushed with necessary vigour, - For my own part however I believe and from subsequent experience in it, that there are cases which no boldness, (tho' it borders on temerity) is able to subdue. - I will state two of these cases by way of example. -

" A child three years old, was attacked with pain the side and fever, with difficult breathing, he was bled and purged, the pain was removed and the difficulty of breathing lessened, on the third day he was delirious with but little fever, accompanied by pain in the head, and a quick pulse, and still with Pneumonic symptoms, and delirium; He took the Spts. Mindereri for the Physician was afraid to stimulate him, and blisters were applied, to the temples - on the fourth day he complained of pain in his right eye, for the first time, and on examining it, found it. I say much inflamed the Vessels from the inner canthus forming a plexus over the Sclerotic Coat, to where the transparent Cornea commences, he took calomel at Night, had the

unguent Hydrargyri, rubed in his thighs and wet Sa=
=turine cloths applied to his eye, on the fifth morning
pus was discovered to have effused itself, between the his
and transparent Cornea, at the inferior and outer part
of it, and the patient was perfectly in his senses and
composed, the Vessels leading to the transparent Cornea
were diseased, and they the consensually, the patient was
thought to be safe, he sat up, had but little fever
and was perfectly rational, on the sixth morning he
was as well as the day before and the Vessels again dis=
=eased, and hopes were entertained of saving the eye, the
matter evidently was partially absorbed - The seventh
day passed as the preceding, I saw him in the Evening
he was sitting up, in good spirits. He got up about
eleven o'clock at Night, and while sitting by the fire
fell down in a convulsion, he lay from that time
untill 11 O'C. the next day coiled up in his bed passing
his Urine and faces involuntarily, the pupil of his eyes
most remarkably dilated, No doubt existed as to the
cause of his death, but to satisfy others my preceptor
determined to examine the brain. As in the above case
the scalp was thickened in several places and adhered very
firmly to the bone, The dura mater was slightly inflamed,
but the seat of the disease was in the pia mater, Coa=
=gulable lymph was effused under it throughout the brain,

the membrane itself was highly injected with blood and the lobes possessed such a degree of firmness, as inflammation usually occasions, the Ventricles were filled with serum, and the membranary structure injected with blood;— The diseased Eye was particularly examined. The Optic nerve was not itself diseased, the inflammation existing in the Choroid coat which adhered in some places very firmly to the Sclerotic coat— and between the Choroid coat, an Retina, was a deposition very like a thin purulent matter, the Vitreous humour had lost its transparency, and was of a deep yellow colour— The lens was not affected, but the capsule partook of the disease, which described as existing in the Vitreous humour." This case certainly possesses great peculiarity; It commenced precisely as the ordinary epidemic in the Lungs, but was relieved, It then was translated to the brain, the eye became the seat of the disease and the brain was relieved, It again commenced its operation on the brain, and in a short time, deciding the fate of the patient— But I was inclined to believe that the disease in this case tho' thus suddenly translated was not innocuous in the lungs— and that effusion took place in the Thorax at the same time, that the brain was filled with fluids, it was intended to examine the Lungs but in this we were disappointed, the gentleman

who was to do it, being too unwell to attend to the subject. the body was however opened and from the young man who did so, it was ascertained that several quarts were discharged from the cavity, as soon as it was cut into.— Besides this I witnessed a third case, in which the disease commenced in the head and was ushered in by a severe ague, the eyes were turned and inflamed, the pulse contracted, and hard, the patient was bled, and felt great relief from it; he was vomited and seemed to be doing well, he had a return of fever at night but it was attended by sweat, and was without much pain, the blood taken was remarkably sizy. on the third day he was seized with pain in his breast, and great difficulty of breathing, he was bled again and his pulse evidently opened after the bleeding— tho' still the blood was very sizy— He took calomel to purge him, on the fourth day he was bled again, as his pulse was active, and the pain violent, the sizy in the blood proportionally great, he spoke with great clarity and spirit, and appeared to be, unusually sensible to light and sound, the pupil of the eye was contracted, and the sclerotic coat turgid with blood, he had slept but little since his attack, and in the course of the fifth night, the Physician who had attended him was sent for, in great agitation, he gave him an opiate hoping it might relieve him, as he did not

like to bleed without a consulting physician. The opiate had no effect, and he became delirious. In the morning an erysipelatous inflammation had closed the eyes, and extended a little way down the cheeks. He was more composed and conversed rational when spoken to, tho' with great preternatural promptness. his skin was cool, and his pulse had contracted. he took calomel as he was disposed to be costive, his fever returned in the course of the day but was not considered safe to bleed him, his delirium increased so that it was difficult to keep him in bed. He died the next morning. I did not get an opportunity to examine this case, but its similarity to that above described is so remarkable, as to leave no doubt as to its nature, and the mode in which the patient was destroyed. The Erysipelatous inflammation which supervened was endeavoured to be kept on the surface, by means of warm applications, as its continuance then would probably relieve the brain. It did not recur but notwithstanding this, the patient was not relieved. I cannot but think altho' there is much written to the contrary, that this appearance should not have influenced the use of the lancet in a disease so violently after the seizure, it might perhaps be an attempt to relieve it, but the regular exacerbations of fever even to the last night indicated

that some other relief was required by the system:— Blisters to the head were not used because they are powerful in repelling cutaneous affections. I think if any thing could have done good it must have been a further loss from the circulating fluids.— Besides this I have seen two other cases, in which the disease appeared in an Erysipelatous form in one it commenced in the eye, in the other on the Parotid gland enlarged by Mumps.— The fourth case terminated fatally in fifty hours by extravasation in the brain, It came on after a drunken fit, the second was propagated along the fascia of the Neck down over the left of the Thorax, and over the left half of the Oblique Muscle, and terminated in death, with every symptom of affected brain in forty eight hours. The first case at its commencement, was attended by but little fever, owing perhaps to the debility left after debauch, No active course was pursued till fever came on, then the pulse was bounding and strong. He was shaving and the carotids pulsating strongly, he was bled largely, and appeared more sensible after the evacuation, a blister was applied to the head, he took from the first a solution of Tart: Antim: every three hours to purge him gently, the symptoms evidently gained ground

ground, as he died about fifty hours after the attack.

This case was preceded by a severe ague, and considerable chilliness attended the other, a similar disease to this has been frequently seen by my preceptor in Hospital practice, succeeding punctures on the scalp of the cranium, in every instance he has seen examined effusion in the brain, had been the immediate cause of death; the two diseases tho' originating from such distinct causes, are so much the same that whatever experience can establish as successful in one, will be found most advantageous in the other; the point is one of great importance as must be evinced by the rapidity of the above cases and the contrary practice can only be reconciled by further experience, In the English Hospitals this form of the Erysipelatous, is mostly trusted to Nature, or to a course of Stimuli which is perfectly, insignificant, In the French it is managed and I believe more successfully by means of broken doses of Tartrized Antimony.

The Paris Journal, contains many cases evincing the success of their mode of treatment, I shall now proceed to the last division of my subject, or where the disease affects the abdomen principally, which will not require so long they an account; but the singularities attending its mode of attack,

were truly remarkable.—
In the first ~~many~~ case my tutor saw it commence, with pain in the temples, this was succeeded by slight fever, an Emetic appeared to relieve the patient for a time, on the third day he was attacked by violent pain in the loins, which at length extended to the chest generally, his pulse was small, but blood was taken from him, as the pain was very acute, the warm bath was also tried, he was repeatedly blistered which availed but little; the fever and pain were relieved by these means, aided by calomel; on the fifth day his pulse was so low as to require support, on the 6th a general jaundice made its appearance, his pulse was nearly indistinct, and remarkably slow, his breathing without pain became more obstructed, a sweat broke out on the head and shoulders, and he died on the eighth day with every indication of an affection of the lungs.—
The second case of abdominal affection came on in the shape of Colic, with great pain in the course of the Colon, pulse small, and contracted, spasmodic respiration, with eructation of air, attended by exquisite suffering; from the beginning the patient could only breath in an erect posture, He felt constant propensities to expectorate, but the diaphragm appeared to be incapable of action, he was put into a bath, and took Opium

at regular intervals and seemed to suffer less, but did not breath more freely, the pulse under the stimulus rose but little, and a profuse sweat broke out over the body, the hairs were translated to the loins, and blisters applied, on the second morning of the disease, he expectorated a thick brown mucous in considerable quantities, the respiration however never ceased to be convulsive, he then complained of pain and fullness in the chest; he sweated much on the shoulders and head, became more drowsy, pulse more irritated and died suffocated on the fourth morning. A third case was one which succeeded measles and commenced in the night with severe chills. The fever succeeding them was considerable, but an emetic arrested it in a few hours. he was thought relieved, as he had no pain in either side or breast, but his countenance was strikingly altered in a few hours, he became restless the first night, after his attacks, his pulse small and frequent; his feet and legs were bathed, and he took a small anodyne. On the second morning he had return of fever, but his pulse was small, he took an aperient and his fever declined at night, he complained of no pain, but rather an uneasiness at the stomach, with great disposition to eructate, he slept but little this night, and in the morning complained of great

agony in the belly — and at night in his side which made his breathing somewhat convulsive, the countenance from the second day indicated some vital affection, and these appearances were considered as ascribing his fate, his pulse at this time was small and contracted he breathed with difficulty, intense pain in his belly and side; and great vomiting: it was agreed on consultation to bleed him, as the lines or peritoneum one was thought affected, and to apply a blister to his side and keep his bowels open. he was easier after being bled; the blood flowed with great celerity, and exhibited a remarkably sizy appearance, his pulse was astonishingly altered after the bleeding, it became much fuller and not so quick, as the pain returned at night he was again bled, and with the same relief; he was more composed that night but slept very little, on the fourth morning he had but little fever, it returned however before mid day, and was attended with exquisite suffering in the belly — his abdomen seemed swollen and tender to the touch, his pulse became contracted, he was again bled and in a measure again relieved; a blister was applied over the abdomen and took a gentle apperient; the blood drawn in the morning coagulated finly, and with a thick

size; during this day he slept a little and the pain in the belly abated, he took Expectorants, and warm fomentations were kept over the belly. he had a restless night.

On the morning of the sixth day of his indisposition he was attacked with pain in the right lung, greatly embarrassing his breathing and expectoration. His pulse tho' small was not weak and he was again bled. - about ℥viij was drawn with the same effect as before and with similar appearance and a blister applied to the breast. His breathing however became more laborious, from the first moment of this attack, the pain in a few hours ceased to be acute, and he complained only of fulness in the breast, his pulse became smaller and more indistinct and he was sensible of great heat, the next morning his hands were cool and somewhat livid, he sweated on the forehead which felt cool, his mental faculties were unimpaired, respiration became gradually more laborious, pulse more indistinct, drowsiness supervenes and he dies on the eighth day, in a few hours after death, the body was completely yellow, as tho' he had labored under chronic Jaundice. - these cases which has prevailed here for many months are faithfully submitted, and it is a question by all the Physicians in this district, that they have never before seen a disease

of the same or similar nature. It is not pretended to say that it is a disease which has prevailed in various Sections of the Country. But it is believed that it is modification of the same complaint; most unquestionable as we have suffered from it, it has exhibited nothing of the Typhus character, and the remedies most successful in that form of fever have proven incompetent either to cure it, or to mitigate its attack. as it has appeared here, it has differed from Typhus in the following very obvious and constant characters.—

1: It has had nothing of the heat of Skin of Typhus.—

2: It has presented no brown Tongue and sordes on the Teeth.—

3: It has never terminated in any thing like the time of Typhus, but much more rapidly.—

The diseases indeed as we have seen them are strikingly different, that when seen together, we are surprised they ever could have been confounded. In the various accounts which have been given of Epidemics, great pains have been taken to trace them to some particular causes of a perceptable nature,— And in this as in other cases a thousand immaginary conjectures have been formed as to its real production. Some have accused the Shipping as instrumental in giving it birth, and suppose it then propogated by

contagion from one place to another, others have attributed it to the incomprehensible changes in the air, either with or without connection with commotions of the earth, and one writer later in the Theory that all the rest, attributes it to a deficiency of oxygen in the atmosphere, these speculations are perfectly futile because in the actual state of human knowledge, we are incapable of comprehending, and by persisting in them we only substitute one difficulty for another, and more than this 'tis an injury to Science to rest satisfied with a cause, which tho' believed to be unsatisfactory is yet retained for the want of more perfect one. It is a little surprising that the causes of diseases (and even of those which have been observed with attention for more than a century) is hardly in one instance regarded as conclusively ascertained, and yet with this fact before them Medical men undertake, to assign the reasons of diseases (as yet scarcely observed) with a boldness which hardly tolerates a doubt of their explanation. But altho' I cannot say what was the cause of this disease, we shall do service in saying what it did not originate from, and at all events get rid of the source of Error, that it did not originate from the Shipping

is proven by sailors not suffering more than men in other situations, and by the history of the disease which evinces, that it was known in the Section of the Country a hundred miles from the sea board, at the foot of the Blue Ridge mountain, and the Borough of Norfolk suffering less, than the adjacent Country; the belief however has been, that those residing in Town, and having intercourse with the Shipping, Docks, and Banacks, have carried it in their clothes to the Country, - Experience however in the Naval Hospital at Gosport, has settled this point. It never has to my knowledge been communicated from one to another in the same Ward, and the observations of every man, I have conversed with on the subject pronounces the same, altho instances have occured of several persons in the same family falling victims to the disease; still these cases are rarely met with, and it certainly is more physiological not to attempt their explanation, than to offer these solitary instances, to the general experience of the complaint. - Far as we are from ascertaining the cause of this wretched malady, we are but little nearer its proper mode of treatment. - and indeed its principle feature seems to be, in the innumerable forms, which it is capable of assuming.

In its transitions from one part of the system to the other, appears to me to be discovered the true character of the affection. Whether the cause which gives rise to the disease possesses a specific action, has been a problem suggested by some with great anxiety, and it will probably be ascertained much about the same time, that they discover in what the disease really consists; but this most certainly never will be found out, in a litigation about words. It must be the effect of close observation, and a careful examination of morbid appearances. Luckily however for society the remedies most useful, may be more readily ascertained, as experience may guide us safely, when reason is lost in conjecture, and this experience appears to me is what is most desirable, to be communicated to the world. The irregular character of the complaint itself in the same situations, requires a particular modification of treatment, how then can it be expected to establish a plan capable of including every shape of variety. The division which I have adopted, in the history of the disease is to me unsatisfactory, but it is the one which appears to me to be least exceptionable. I followed as nearly as I could the course of the malady, and the appearances on dissection

evince in a great measure, that the arrangement is not merely for the sake of convenience, altho the disease did not insulate itself in one particular structure as the division may lead one to believe, still one particular part was most affected and seemed to be the leading feature in the complaint, as far as my investigation has extended in the disease, I am entitled to conclude from it, and the inductions are only meant to apply to to other precisely similar cases, we may say then, where the disease invaded the lungs, in the first form, it was an inflammatory complaint, as proven by the appearances after death, the second form was an affection of the mucous lining of the air tube, In this case the disease is so like croup that whether it was inflammatory or not, we will not attempt to decide, 'till it is found out what particular modification of an action in the lepels produces that disease. In these cases however the air tubes appeared to be choked with mucous, Whenever the disease afflicted the throat, it was favourable to find the glands enlarged, In these cases the pulse tho' small was not weak, and here the use of the lancet was beneficial, Scarifications were also of benefit. this simple form rarely proved fatal

tho' the difficulty of breathing was often great. A small pulse attended frequently, with cool extremities and pain in the Thyroid Cartilage is the State of the disease which terminated generally fatal. — In some of these fatal cases the patient tho' able to walk about, had involuntary evacuations from the bowels. This may be considered as an aggregate form, of the second affection of the Lungs but commencing its career in the Larynx.

Van Swieten describes these cases precisely as I have seen them in the 8th Vol: of his commentaries on Boerhave. The morbid anatomy of this disease is greatly to be wished for. — The disease invaded the brain either as apoplexy sinking the powers of life, or with fever and delirium; generally Erysipelatous marks attending. The morbid appearances in the first form I can say nothing about; In the second they generally indicated marks of high inflammation; The disease in this Shape notwithstanding active remedies proved fatal; In the Abdomen the disease made its appearance in the form of Peritonial Inflammation, with small contracted pulse, pain, flatulence, convulsive breathing; — It was often fatal propogated to the lungs with difficult respiration.

In many instances it was complicated with Jaundice;- Altho' the morbid appearances in the Abomen in these cases were not examined; hardly a doubt can remain, from the Symptoms of the disease, that inflammation either of the Liver or Peritoneum was its commencing Stage, and that a similar State of the Lungs, subsequently induced gave rise, to the particular State of the respiratory organ which may be considered as the immediate cause of death;- Having now finished this imperfect essay. I shall here conclude and wait with patience untill this impartial board, decides on my destiny.—

50 C.

Pleurisy

A pretty good exposition of the disease

Pleuritis 1824

Minimo allevigo